



IDAHO MOTOR CARRIER IDENTIFICATION REPORT

(Application for Intrastate USDOT Number)

TO OBTAIN A NUMBER, COMPLETE THIS FORM AND RETURN TO
IDAHO STATE POLICE/ COMMERCIAL VEHICLE SAFETY AT:
700 S Stratford Drive
MERIDIAN, ID 83642-6202
(208) 884-7220 OR FAX TO: (208) 884-7192

TO BE ELIGIBLE FOR AN INTRASTATE USDOT NUMBER, THE VEHICLE (S) MUST BE OVER GVWR OR COMBINATION GVWR 26,000, OR HAUL HAZARDOUS MATERIALS OR PASSENGERS. IF YOUR COMPANY DOES NOT MEET THESE REQUIREMENTS, DO NOT FILL OUT THE APPLICATION.

REASON FOR FILING

(CHECK ONE) () NEW APPLICATION () UPDATE INFORMATION () OUT OF BUSINESS

LEGAL NAME				DOING BUSINESS AS NAME															
PHYSICAL ADDRESS				CITY				STATE				ZIP							
MAILING ADDRESS				CITY				STATE				ZIP				TAX ID NUMBER (MUST HAVE AT LEAST ONE FILLED IN)			
E-MAIL ADDRESS												EIN#				SSN#			
PRINCIPAL PHONE NUMBER				CELL NUMBER				FAX NUMBER				COMPANY OPERATION A. INTRASTATE (travel only in Idaho – never leaves the state) B. INTRASTATE-HAZARDOUS MATERIALS C. INTRASTATE Shipper							
OPERATION CLASSIFICATION (Circle All That Apply)																			
A. Authorized For Hire				D. Private Passengers (Business)				G. U.S. Mail				J. Local Government							
B. Exempt For Hire				E. Private Passengers (Non-Business)				H. Federal Government				K. Indian Tribe							
C. Private Property				F. Migrant				I. State Government				L. Other _____							
CARGO CLASSIFICATION (Circle All That Apply)																			
A. GENERAL FREIGHT				I. MACHINERY, LARGE OBJECTS				Q. COAL/COKE				Y. PAPER PRODUCTS							
B. HOUSEHOLD GOODS				J. FRESH PRODUCE				R. MEAT				Z. UTILITY							
C. METAL: SHEETS, COILS, ROLLS				K. LIQUIDS/GASES				S. GARBAGE, REFUSE, TRASH				AA. FARM SUPPLIES							
D. MOTOR VEHICLES				L. INTERMODAL CONT.				T. U.S. MAIL				BB. CONSTRUCTION							
E. DRIVE AWAY/ TOWAWAY				M. PASSENGERS				U. CHEMICALS				CC. WATER WELL							
F. LOGS, POLES, BEAMS LUMBER				N. OIL FIELD EQUIPMENT				V. COMMODITIES DRY BULK				DD. OTHER _____							
G. BUILDING MATERIALS				O. LIVESTOCK				W. REFRIGERATED FOOD											
H. MOBILE HOMES				P. GRAIN, FEED, HAY				X. BEVERAGES											
List the gross vehicle weight rating, or gross combination weight rating or gross vehicle weight or gross combination weight of each vehicle or combination of vehicles. (NOT the registered weight)										DRIVER INFORMATION: Enter The Number Of Drivers									
_____										_____ 100 MILE RADIUS _____ BEYOND 100 MILE									
_____										_____ TOTAL DRIVERS _____ TOTAL CDL DRIVERS									
										Number of Passengers (including the driver)									
Equipment	# Straight Trucks	# Truck Tractor	# Trailers	# HazMat Cargo Tank Trailers	# HazMat Cargo Tank Trucks	# Motor Coach	# School Bus 1-8 9-15 16+			# Mini-bus 16+		# Van 1-8 9-15							
OWNED																			
TERM LEASED																			
TRIP LEASED																			

HAZARDOUS MATERIALS CARRIED OR SHIPPED (Circle All That Apply)

C-CARRIED

S-SHIPPED

B (BULK) –IN CARGO TANKS

NB (NON-BULK)- IN PACKAGES

C S A. DIV 1.1	B NB C S K. DIV 2.2A (AMMONIA)	B NB C S U. DIV 4.2	B NB C S EE. HRCQ	B NB
C S B. DIV 1.2	B NB C S L. DIV 2.3A	B NB C S V. DIV 4.3	B NB C S FF. CLASS 8	B NB
C S C. DIV 1.3	B NB C S M. DIV 2.3B	B NB C S W. DIV 5.1	B NB C S GG. CLASS 8A	B NB
C S D. DIV 1.4	B NB C S N. DIV 2.3C	B NB C S X. DIV 5.2	B NB C S HH. CLASS 8B	B NB
C S E. DIV 1.5	B NB C S O. DIV 2.3D	B NB C S Y. DIV 6.2	B NB C S II. CLASS 9	B NB
C S F. DIV 1.6	B NB C S P. CLASS 3	B NB C S Z. DIV 6.1A	B NB C S JJ. ELEVATED TEMP MAT	B NB
C S G. DIV 2.1	B NB C S Q. CLASS 3A	B NB C S AA. DIV 6.1B	B NB C S KK. INFECTIOUS WASTE	B NB
C S H. DIV 2.1 LPG	B NB C S R. CLASS 3B	B NB C S BB. DIV 6.1 POISON	B NB C S LL. MARINE POLLUTANTS	B NB
C S I. DIV 2.1 (METHANE)	B NB C S S. COMB LIQUID	B NB C S CC. DIV 6.1 SOLID	B NB C S MM. HAZARDOUS SUB (RQ)	B NB
C S J. DIV 2.2	B NB C S T. DIV 4.1	B NB C S DD. CLASS 7	B NB C S NN. HAZARDOUS WASTE	B NB
			C S OO. ORM	B NB

CERTIFICATION STATEMENT (To Be Completed By An Authorized Official)

I, _____, certify that I am familiar with the Idaho Motor Carrier Safety Rules and/or the Idaho Hazardous Materials Rules. Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct and complete.

Signature _____ Date _____ Title _____
ISP-INTRA-150ID (2/2010)